EXPRESS MAIL NO. EV530944475US

Effective on 12/08/2004.				Complete if Known					
Rees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).				Application Number		10/717,744			
FEE TRANSMITTAL				Filing Date		November 20, 2003			
11 2 2 2005 H for FY 2005				First Named Inventor		Felice M. Sciulli			
				Examiner Name		Jason D. Prone			
Applicant/claims small entity status. See 37 CFR 1.27				Art Unit		3724			
TOTAL-ÂMOUNT OF PAYMENT (\$) 1,810				Attorney Docket No. 340058.534D1					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments Charge any underpayments or credit any overpayments									
of fee(s) under 37 CFR 1.16 and 1.17 Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH				4 FFFC		INATION			
FILING FEES SLANGE					F	EES			
· ·		Small Entity		Small Entity		<u>Small</u> Entity			
Analiantian Tuna	E (¢)	Eng (\$)	Eac (\$)	Foo (\$)	E00 (\$)	Fee (\$)	Eo	es Paid (\$)	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u> 250	Fee (\$) 200	100	. <u>16</u>	es raid (v)	
Utility	300	150	500		130				
Design	200	100	100	50		65			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)									
Fee Description	dudina Daisa					<u>.</u>	50	25	
								100	
Zast interpolition of the state									
Multiple dependent claims 360 180									
Total Claims Extra Claims Fee (\$)				Fee Paid ((<u>a)</u>	Multiple Dependent Claims For (\$) For Boild (\$)			
$\underline{7}$ -20 or HP = $\underline{0}$ X $\underline{50}$ =				<u>0</u>		Fee (\$) Fee Paid (\$) 360 0		•	
								<u>0</u>	
Indep. Claims									
$\underline{2}$ -3 or HP = $\underline{0}$ X $\underline{200}$ = $\underline{0}$									
HP = highest number of independent claims paid for, if greater than 3									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction									
thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra She	•	• •	dditional 50 o	r fraction 1	thereof Fe	e (\$)	Fee Paid (\$)	
-100 =		/50 =		to a whole nu		x			
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Request for Continued Examination Fee 790									
Extension Fee, Response Within Third Month									
SUBMITTED BY									
	M	7	Real	istration No.	25.022	Talaghass	200.00	22.4000	
(Attorney/Agent) 33,9						Telephone	206-622-4900		
Name (Print/Type)	orraine Lin	ford				Date	July 22	2, 2005	

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